

**Abstract 628**

**TITLE:** Testing Pregnant Women for HIV: A Survey of Obstetricians and Review of Patient Prenatal/Obstetric Medical Records, Connecticut, 1996-1997

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**BACKGROUND/OBJECTIVES:** High rates of prenatal testing are needed to identify all HIV-infected pregnant women and initiate the necessary treatment to prevent transmission to their offspring. The purpose of this study was to evaluate prenatal HIV testing practices in Connecticut where HIV counseling but not testing is required by law.

**METHODS:** To evaluate HIV testing of pregnant women in Connecticut, a survey was conducted in 1998 of licensed obstetricians and a review was performed of 992 randomly sampled prenatal and obstetric medical records for births occurring in 1996.

**RESULTS:** Results of the survey indicated that 79% of obstetricians routinely offered HIV counseling and 76% routinely offered HIV testing to pregnant patients in 1997. However, only 44% reported that greater than half of their patients were being tested. Providers who had an HIV testing policy that included providing HIV testing unless the patient refused had the highest rate (81%;  $p < 0.05$ ). The review of medical records revealed that only 29% of women who delivered in 1996 had an HIV test performed during prenatal care. Maternal characteristics associated ( $p < 0.05$ ) with testing included Hispanic ethnicity (52% tested), younger age (54%,  $< 20$  years old), Medicaid enrollment (48%), prenatal care by a hospital clinic (45%), and history of IDU (77%). Testing rate stratified by hospital of delivery ( $n=30$ ) varied from 0% to 83%. More than 95% of were screened for hepatitis B although law in Connecticut does not require such screening.

**CONCLUSIONS:** Considerable modification of provider and hospital practices and policies is needed to raise HIV screening rates. Adoption of a routine prenatal HIV testing policy (with option for patient refusal) by physicians and hospitals could achieve high HIV screening rates.

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